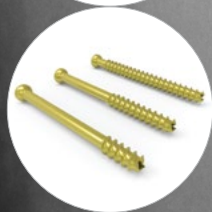


Closed Bimalleolar Ankle Fracture Treatment Using Anatomic Rigid Fixation

Case Study

Kent Ellington, MD

A 53-year-old male with a closed bimalleolar fracture was treated with the Acumed Ankle Plating System 3 and Small Fragment Base Set.




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We are dedicated to developing products, service methods, and approaches that improve patient care.

Case Study | Kent Ellington, MD



X-ray showing lateral malleolar fracture



Medial view

Patient History

The patient is a 53-year-old male who fell five feet off a ladder in July 2015. He sustained a closed bimalleolar fracture that was splinted in the emergency room. He presented to the clinic one day later and went to the operating room post-injury on day three.

Treatment

Treatment included open reduction internal fixation of his ankle fracture. The Acumed Ankle Plating System 3 and Small Fragment Base Set were used to provide fixation. This required a routine lateral and medial approach to the ankle. The patient was placed in a supine position. The fibula had distal comminution. There was one oblique fracture line that was reduced, then fixed initially with a lag screw. The Lateral Fibula Plate was used to complete ORIF of the fibula. Next, the medial malleolar fragment was reduced, then fixed with two 4.0 mm cannulated partially threaded screws with excellent compression.

Postoperative Care

At final follow-up, the patient was ambulating well without a brace. He was back to work and walking for exercise.

Discussion

This fracture pattern can be difficult to treat due to the fibular comminution. The necessary tools, instruments, plates, and screws required to complete ORIF of ankle fractures are included in the Acumed Ankle Plating System 3. The Lateral Fibula Plate has an excellent fit. With anatomic rigid fixation, the patient was allowed to weight-bear earlier, allowing faster rehabilitation.



10 months postoperative



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